



# Illinois Department of Transportation

## Application for Semitrailer Registration

Mail, Fax, or Email Application to:

Illinois Department of Transportation  
2300 S. Dirksen Pkwy., Rm. 117  
Springfield, IL 62764

Fax: (217) 782-3573

Email: [Permitoffice@dot.il.gov](mailto:Permitoffice@dot.il.gov)

### IDOT Use Only

Classification \_\_\_\_\_

IDOT Decal Assigned \_\_\_\_\_

Fee Paid \_\_\_\_\_

Registration Expires \_\_\_\_\_

Owner \_\_\_\_\_ Account Number \_\_\_\_\_

Address \_\_\_\_\_

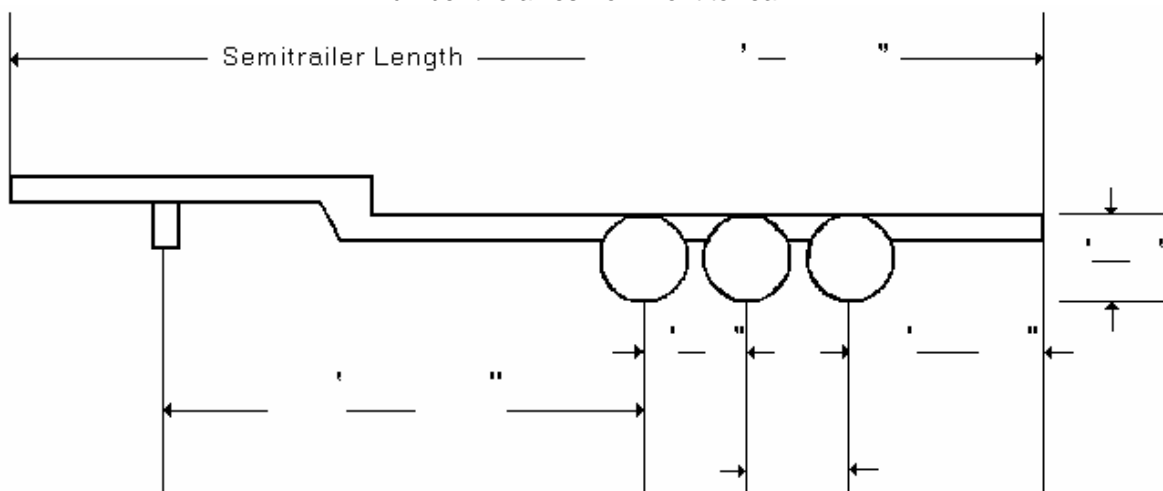
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Make of Semitrailer \_\_\_\_\_ Serial Number \_\_\_\_\_

Is the loading on any axle capable of being controlled independently from the other axles? ☐ Yes ☐ No

If yes, explain \_\_\_\_\_

NOTE: Show all axles and spacings.  
Number the axles from front to rear.



Semitrailer Weight \_\_\_\_\_ Semitrailer Width \_\_\_\_\_

Current License \_\_\_\_\_ State \_\_\_\_\_

**I certify that the above statements are true and correct.**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Official Capacity